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Form Approved OMB No. 2000-0138

EPA Form 8900-1

Notification Hazardous Waste Sit



United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compen- paper. Indicate the letter of the item sation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of which applies.

NJS 000 001 408

277957

Person Required to Notify:	()(), -	ED STATES PRINTING INK
Enter the name and address of the or organization required to notify	ne person —————	OURRAY HILL PARKWAY
	City E. RUTH	
	City E. RUTE	State NO Zip Code O 70 73
Site Location:		1
Enter the common name (if know actual location of the site.	vn) and Name of Site	ON LAND FILL
actual location of the site.	Street / 0 0 0	VALLEY BROOK AV.
NJD0692916	56 City LYNDHUR	ST County BERGENState NJ Zip Code 0707
Person to Contact:		
Enter the name, title (if applicabl		LEINER, SAM CHIEF ENGINEER
business telephone number of the to contact regarding information submitted on this form.	Phone (201)	933 - 7100
Dates of Waste Handling:		
Enter the years that you estimate treatment, storage, or disposal be ended at the site.		L To (Year) 1972
Waste Type: Choose the option Option I: Select general waste tyou do not know the general waste encouraged to describe the site in General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category. 1. ☑ Organics 2. ☒ Inorganics 3. ☐ Solvents 4. ☐ Pesticides	ypes and source categories. If ste types or sources, you are	Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261). Specific Type of Waste: EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site located.
5. K Heavy metals	5. Paper/Printing	
6. ☐ Acids 7. ☐ Bases	6. □ Leather Tanning7. □ Iron/Steel Foundry	
8. □ PCBs	8. Chemical, General	
9. Mixed Municipal Waste	9. □ Plating/Polishing	
10. ☐ Unknown	10. ☐ Military/Ammunition	
11. A Other (Specify)	11. Electrical Conductors	
OO (PAINTS + PIGMENTS	-	
	13. ☐ Utility Companies	
	14. ☐ Sanitary/Refuse	
	15. Photofinish	
	16. ☐ Lab/Hospital	
	17. ☐ Unknown	
	18. ☐ Other (Specify)	

	Notification of Hazardous Waste Site	Side Two	
F	Waste Quantity:	Facility Type	Total Facility Waste Amount
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. ☐ Piles 2. ☐ Land Treatment	outsic feet 30 T
	In the "total facility waste amount" space	3. Landfill	gallons
	give the estimated combined quantity (volume) of hazardous wastes at the site	4. □ Tanks	Total Facility Area
	using cubic feet or gallons.	5. □ Impoundment6. □ Underground Injection	square feet
	In the "total facility area" space, give the estimated area size which the facilities	7. Drums, Above Ground	acres
	occupy using square feet or acres.	8. ☐ Drums, Below Ground 9. ☐ Other (Specify)	
G	Known, Suspected or Likely Releases to		
~	Place an X in the appropriate boxes to indicat	e any known, suspected,	☐ Known ☐ Suspected ☐ Likely ☐ None
	or likely releases of wastes to the environmer		
	Note: Items Hand I are optional. Completing hazardous waste sites. Although completing	these items will assist EPA and Sta the items is not required, you are e	te and local governments in locating and assessing incouraged to do so.
Н	Sketch Map of Site Location: (Optiona	1)	
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.		
ı	Description of Site: (Optional)		
	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.		
J	Signature and Title:		
	The person or authorized representative (such as plant managers, superintendents,	Name	Owner, Present
	trustees or attorneys) of persons required	Street	□ Owner, Past
	mailing address (if different than address		— □ Transporter □ Operator, Present
	notification, the signature is optional.	City Sta	te Zip Code Operator, Past
	Check the boxes which best describe the relationship to the site of the person	1 - + ~	☐ Other
	required to notify. If you are not required to notify check "Other".	Signature Agnalure 4	Car Bele

2244104

NEW JERSEY STATE DEPARTMENT OF ENVIRONMENTAL PROTECTION P.O. BOX 1540, TRENTON, NEW JERSEY 08625

					_			ODDD AMEON
ADDITCATION	FOR	CERTIFICATION	ጥር	CONDUCT	Α	REFUSE	DISPOSAL	OPERATION
MERTICATION	I OI	CTIVITY	1	00212002				

•	ration of the State of New Jersey
Trade Name	County Registered
Location of operation Block 2	224 - Lot 23 and Block 225 (Block Numbers)
	, 8, 9, 10, 11 and 13
Township of Lyndhurst	Bergen
(Municipality)	(County)
Business mailing address of ope	97071 Telephone (201) 933-9500
(Zi If incorporated, state where	ip Code) New Jersey (State)
Targe and addresses of officers	
	Address 117 Yantacaw Brook Road Upper Montclair, N.J. 070
President Frank F. Viola	
Company of the Compan	Address 11 Stewart Avenue, Nutle
Vice President Louis Viola Secretary Thomas C. Viola	Address 63 Heller Way
Vice President Louis Viola	New Jersey 07110

	Names and addresses of owners of property where operation is conducted Township of Lyndhurst, Municipal Building, Lyndhurst, New Jersey
	River Rail Realty Co., 101 Gregory Avenue, West Orange, New Jersey
	River Rail Realty Co., 102 Closery
() () (1444) () ()	Type of operation for which this application is made Sanitary Landfill X Composting Plant Incinerator Other(Explain)
	Operational design prepared by a licensed professional engineer Attached Previously submitted (date)
	Attached (date)
10.	Approvals by local governing body
	Attached X Previously submitted (date)
.11.	Stream and flood plain encroachment permits
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Attached Previously submitted May 12, 1970 (date)
30 Z	en de la companya de
112.	Type of refuse to be accepted for disposal **Bulky Items (Community Clean Up)
•	XHousehold X Bulky Items (community)
	**XCommercial
	- Industrial
7	Ingite at the second of the se
:	XInstitutional Junk Automobiles
	There Stamps (Liquid or Solid)
	Topoge Strings was discontinuous Chemicals (1144-1
••••	XPrunnings Waste Oil
	Otners list
_	hereby certify that the foregoing information and statements are true
· to	the best of my knowledge and belief
	Signature of Applicant by: Stonias O
	Number and Street 1000 Valley Brook Avenue
	City, State & Zip Code Lyndhurst, New Jersey 07071
	DATE June 4, 1970
	DO NOT WRITE BELOW LINE - DEPARTMENT USE ONLY
	DO NOT WRITE BELOW LINE - DELINITION
-	()
	ate Received $\frac{6/8/70}{}$
	eviewed by Date 6/11/40
	ertificate Issued 7/21/76 (Number)
	(Date)



United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Compre-

Please type or print in ink. If you need additional space, use separate sheets of

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,	hensive Environmental Response, Comsation, and Liability Act of 1980 and mbe mailed by June 9, 1981.		etter of the item AJS 000 00/039
	-8 JUN 1981		
A	Person Required to Notify:	11-	CC La Danka Tura
	Enter the name and address of the per or organization required to notify.	son ———	ffmann-La Roche Inc. O Kingsland Street
			tley State N.J. Zip Code 07110
В	Site Location:		
	Enter the common name (if known) and	d Name of Site AV	on Landfill
	actual location of the site.	Street Po	lito Avenue
	NJD069291656	city Lyndhurst	County Bergen State N.J. Zip Code 07071
\overline{c}	Person to Contact:		KACE, J. J.
	Enter the name, title (if applicable), and		e) Dr. J. S. Kace , Manager, Environmental Affai
	business telephone number of the pers to contact regarding information submitted on this form.	Phone	(201) 235-5625
<u>D</u>	Dates of Waste Handling:		
	Enter the years that you estimate wast treatment, storage, or disposal began a ended at the site.		n то (Year) 1969
E	Place an X in the appropriate boxes. The categories listed boxes	nd source categories. If es or sources, you are I—Description of Site. rce of Waste: e an X in the appropriate	Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261). Specific Type of Waste: EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of
	2. ☐ Inorganics 2. ☐ 3. ☐ Solvents 3. ☐ 4. ☐ Pesticides 4. ☐ 5. ☐ Heavy metals 5. ☐ 6. ☐ Acids 7. ☐ Bases 7. ☐ 8. ☐ PCBs 8. ☐ 9. ☐ Mixed Municipal Waste 10. ☐ Unknown 10. ☐ 11. ☒ Other (Specify) 11. ☐ See below 12. ☐ 13. ☐ 14. ☐ 15. ☐ 16. ☐ 17. ☐ 18. ☐	Mining Construction Textiles Fertilizer Paper/Printing Leather Tanning Iron/Steel Foundry Chemical, General Plating/Polishing Military/Ammunition Electrical Conductors Transformers Utility Companies Sanitary/Refuse Photofinish Lab/Hospital Unknown Other (Specify)	Sanitary wastes had been transported to this site prior to 1969 for over 20 years. Employees have some recollection of flammable liquids being transported to this site. However, the company has no records covering this time period to verify the types of wastes brought to the site and the company does not know if the disposal site ignited the waste
	Form Approved OMB No. 2000-0138		as a disposal method.)

OMB No. 2000-0138 EPA Form 8900-1

	Notification of Hazardous Waste Site	Side Two		
F	Waste Quantity:	Facility Type	Total Facility Waste	e Amount
	Place an X in the appropriate boxes to indicate the facility types found at the site.	□ Piles □ Land Treatment	cubic feet Unkn	own *
	In the "total facility waste amount" space	3. 🛭 Land Heatment	gallons	
	give the estimated combined quantity (volume) of hazardous wastes at the site	4. □ Tanks	Total Facility Area	t.
	using cubic feet or gallons.	5. Impoundment	square feet Unkn	OWIT
	In the "total facility area" space, give the estimated area size which the facilities	 6. □ Underground Injection 7. □ Drums, Above Ground 	acres	
	occupy using square feet or acres.	8. Drums, Below Ground		
		9. ☐ Other (Specify)		
G	Known, Suspected or Likely Releases t	o the Environment:		
	Place an X in the appropriate boxes to indicat or likely releases of wastes to the environment		☐ Known ☐ Suspect Unknown	ed 🗆 Likely 🗆 None
	Note: Items Hand I are optional. Completing hazardous waste sites. Although completing	these items will assist EPA and St the items is not required, you are	ate and local governments in encouraged to do so.	locating and assessing
H	Sketch Map of Site Location: (Optiona	11)		
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing	÷ .		,
	the direction north. You may substitute a publishing map showing the site location.		Unknown	
$\overline{\mathbf{I}}$	Description of Site: (Optional)			
•	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells,			
	springs, lakes, or housing. Include such information as how waste was disposed			
	and where the waste came from. Provide		Unknown.	
	any other information or comments which may help describe the site conditions.			
			•	
J	Signature and Title:			
	The person or authorized representative (such as plant managers, superintendents,	Name Mr. A. J. Sederis		Owner, Present
	trustees or attorneys) of persons required	Street 340 Kingsland Stre	et.	□ Owner, Past □X Transporter
	mailing address (if different than address in item A). For other persons providing	. •		☐ Operator, Present
	notification, the signature is optional.	City Nutley St	ate N. J. Zip Code 07110	□ Operator, Past
	Check the boxes which best describe the relationship to the site of the person	and Maria	- 1. 18 181	□ Other
	required to notify. If you are not required to notify check "Other".	Signature & Action	Date 6/0/0/	

HOFFMANN-LA ROCHE INC.

NUTLEY . NEW JERSEY . 07110

June 5, 1981

U.S. EPA Region II Sites Notification New York, New York 10007

Re: EPA Notification of Hazardous Waste Site

Dear Sir:

Enclosed is the initial notification information required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980.

Further, please note that manufacturing operations have been conducted at the Nutley, New Jersey site for 52 years and at the Belvidere, New Jersey site for 12 years. Occasional spills and leaks of materials may have occurred at each plant, but it is our belief that no catastrophic events or chronic occurrences with hazardous wastes have occurred which would cause the sites to become de facto facilities.

Should you desire further information, please do not hesitate to contact me at (201)235-4032.

Sincerely yours.

ALJ. Sederis, Director

Corporate Environmental & Safety Affairs

AJS:1c

Enclosure



Form Approved OMB No. 2000-0138 EPA Form 8900-1

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EPA Notification Hazardous Waste Sit



United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compen- paper. Indicate the letter of the item sation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of which applies.

NJS 000001410

		•
Person Required to Notify:		ED STATES PRINTING INK
Enter the name and address of to or organization required to notify	rie person —	
or organization required to methy	Street Lolo	INDUSTRIAL AV.
	City LITTLE	FERRY State NJ Zip Code 合作的学
Site Location:	<i>M</i>	
Enter the common name (if know	vn) and Name of Site 🦰 🧸	ON LAND FILL
actual location of the site.	Street / 0 0	O VALLEY BROOK AV.
NJD 069291	656 City LYNDHU	RST County BERGEN State NJ Zip Code 0707
Person to Contact:		
Enter the name, title (if applicab	le), and Name (Last, First and Tit	tie) LEINER, SAM CHIEF ENGINEER
business telephone number of the to contact regarding information	ne person) 933-7100
submitted on this form.		,
Dates of Waste Handling:		
Enter the years that you estimat	e waste	
treatment, storage, or disposal b	egan and From (Year)	6 da To (Year) 1964
ended at the site.		
Waste Type: Choose the opti	on you prefer to complete	
Option I: Select general waste t you do not know the general wa encouraged to describe the site	ste types or sources, you are	Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).
General Type of Waste:	Source of Waste:	Specific Type of Waste:
Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.	Place an X in the appropriate boxes.	
category.		contacting the EPA Region serving the State in which the site i
1. ∱ Zl Organics	1. ☐ Mining	located.
2. 🗷 Inorganics	2. Construction	
3. ☐ Solvents	3. ☐ Textiles	
4. Desticides	4. ☐ Fertilizer	
5. 🙀 Heavy metals	5. □ Paper/Printing	
6. ☐ Acids	6. Leather Tanning	
7. 🗆 Bases	7. Iron/Steel Foundry	
8. D PCBs	8. Chemical, General	
9. Mixed Municipal Waste	9. Plating/Polishing	
10. 🗆 Unknown	10. ☐ Military/Ammunition	
11. 💆 Other (Specify)	11. Electrical Conductors	
BOD (PAINTS +	12. Transformers	
PIGMENTS)	13. Utility Companies	
	14. ☐ Sanitary/Refuse	
	15. Photofinish	
	16. ☐ Lab/Hospital	
	17. 🗆 Unknown	
	18. ☐ Other (Specify)	
		1

	Notification of Hazardous Waste	Side Two				
F	Waste Quantity:	Facility Type	Total Facility Waste Amount			
	Place an X in the appropriate boxes to indicate the facility types found at the site.	□ Piles □ Land Treatment	cubio feet. 7 T			
	In the "total facility waste amount" space	3. □ Landfill	gallons			
	give the estimated combined quantity (volume) of hazardous wastes at the site	4. 🗆 Tanks	Total Facility Area			
	using cubic feet or gallons.	5. 🗆 Impoundment	square feet			
	In the "total facility area" space, give the	6. Underground Injection	·			
	estimated area size which the facilities occupy using square feet or acres.	 7. □ Drums, Above Ground 8. □ Drums, Below Ground 	acres			
		9. Other (Specify)				
G	Known, Suspected or Likely Releases	to the Environment:				
_	Place an X in the appropriate boxes to indica	Place an X in the appropriate boxes to indicate any known, suspected, Or likely releases of wastes to the environment.				
	Note: Items Hand I are optional. Completing hazardous waste sites. Although completing		te and local governments in locating and assessing ncouraged to do so.			
Н	Sketch Map of Site Location: (Options	al)				
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.	-	,			
1	Description of Site: (Optional)					
	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.					
J	Signature and Title:					
	The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a	Name Street	□ Owner, Present □ Owner, Past □ Transporter			
	mailing address (if different than address in item A). For other persons providing		☐ Operator, Present			
	notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person	City Stat	e Zip Code □ Operator, Past □ Other			
	required to notify. If you are not required to notify check "Other".	Signature Segnature &	reserve			

SEPA Notification of Hazardous Waste Site

United States **Environmental Protection** Agency Washington DC 20460

This initial matter at	
This initial notification information is	
required by Section 103(c) of the Comp	ra.
be mailed by June 9, 1981	UBI

Please type or print in ink. If you need additional space, use separate sheets ofpaper. Indicate the letter of the item

which applies. - NJS 000 00/350 Person Required to Notify: SCA Services, Enter the name and address of the person Inc. of organization required to notify. **6**0 State Street Boston Can MΑ 02109 **State** Zup Code Site Location: . Enter the common name (if known) and LANDFILL actual location of the site. 1 60TO VALLEYBROOK County BERGEN SINE NJ Cmy Lyndhurst Person to Contact: Dunlap, Peter, Director, Environmental Enter the name, title (if applicable), and business telephone number of the person to contact regarding information 617 367-8300 extension 207/ Assurance submitted on this form. **Dates of Waste Handling:** Enter the years that you estimate waste treatment, storage, or disposal began and From (Year) Unknown To (Year) ended at the site. Waste Type: Choose the option you prefer to complete Option I: Select general waste types and source categories. If you do not know the general waste types or sources, you are Option 2: This option is available to persons familiar with th Resource Conservation and Recovery Act (RCRA) Section 3001 encouraged to describe the site in Item I-Description of Site. regulations (40 CFR Part 261). General Type of Waste: Source of Waste: Place an X in the appropriate Specific Type of Waste: Place an X in the appropriate EPA has assigned a four-digit number to each hazardous waste boxes. The categories listed boxes. listed in the regulations under Section 3001 of RCRA Enter the overlap Check each applicable appropriate four-digit number in the boxes provided. A copy of Category. the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is 1. D Organics 1. D Mining 2. D Inorganics 2. D Construction 3. D Solvents 3. D Textiles 4. D Pesticides 4. D Fertilizer 5. D Heavy metals 5 D Paper/Printing 6. D Acids 6. D Leather Tanning 7. D Bases 7. D Iron/Steel Foundry 8. D PCBs 8. D Chemical, General 9.

Mixed Municipal Waste 9. D Plating/Polishing 10. M Unknown 10.
Military/Ammunition 11. D Other (Specify) 11. D Electrical Conductors 12.
Transformers 13. D Utility Companies 14. M Sanitary/Refuse See attached information 15. D Photofinish 16. D Lab/Hospital 17. Ø Unknown 18. D Other (Specify) Form Approved CISH No. 2000 0138

* Avon Landfill Corp.

is the record owner of the Site and a wholly owned subsidiary of SCA Services, Inc. This notification is intended to serve as notification by both the parent and the subsidiary. -

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4	-	300

.Federal Register / Vol. 46, No. 72 / Wednesday, April 15, 1981 / Notices

_	Notification of Hazardous Waste Site	Side Two		
F	Waste Quantity	Facility Type	Total Facility W	note Amount
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. 🗆 Piles	Subscited Uliki	
	In the "total facility waste amount" enace		I I'm land	
:	give the estimated combined quantity (volume) of hazardous wastes at the cite	• 4. D Tanks		
1	using cubic teet or gallons.	5. D Impoundment	Total Facility Are	M
1	in the "total facility area" space, give the estimated area size which the facilities	6. D Underground Injection 7. D Drums, Above Ground		4
	occupy using square feet or acres.	8. Drums, Below Ground	40	
}	Yanna Saaraa	9. D Other (Specify)		
•	Known, Suspected or Likely Release Place an X in the appropriate boxes to indi	00to on., b		
	or likely releases of wastes to the environment	cate any known, suspected, nent	☐ Known ☐ Suspe	ected D Likely D None
	Note: Items Hand I are optional. Complete hazardous waste sites. Although complete	ing these items will assist EPA and State an ing the items is not required, you are encou	d local governments	in locating and assessi
1	Sketch Map of Site Location: (Optio	The state of the s		
	Sketch a map showing streets, highways, routes or other prominent landmarks near	•		•
	The Sile. Place an X on the man to indicate	• •		
	the site location. Draw an arrow showing the direction north. You may substitute a	•		
	publishing map showing the site location.	•	• .	•
	•			
		•		
	•			
	•			
			•	
	•			
_		•		
	Description of Site: (Optional)			
	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.	. : :		
	,			
•	•			
				•
			•	
. 5	Signature and Title:			
•	The person or authorized representative	Name Richard A. Covel,	Esq.	
ì	such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address the first statement of the superintendent of the superi	Siron 60 State Street		Owner, Present Owner, Past
- 1	mailing address (if different than address in item A). For other persons providing notification, the signature is optional.	Criy Boston State MA	Zn Corp. 02109	☐ Transporter ☐ Operator, Present
•	Shock the boxes which beet decribe the	State	Ze Code UZIU9	Operator, Past
•	relationship to the site of the person required to notify. If you are not required	Signature Kiaharl (Casil	- / /	D Other

(FR Doc. 61-11880 Piled 4-14-61; 8:45 em) SILLING CODE 6688-29-C

·						
FORM A: GI	ENERAL FACILITY	INFORMATION .				
		tates Printing I		▼ ,		
Company Na	-	anee Ind. Inc.		of Gulf	_Oil Corpo	ration
Facility 1	Vame: Unite	d States Printin	g Ink		_	
Address:	$\frac{343 \text{ M}}{\text{No.}}$	urray Hill Parkw Street	ay	·	_	
		therford, NJ	~ ć	7073		
•	City	State			-	
Name of P	erson Completing	Form: Sam I	einer		· •	
Position:		Chief Eng	ineer		_	
		933-7100			_	
						70 161 41 (20 11)
	-		7	:		2 8 9 3 (12-15)
		nounts of process water the contract of the co			astes	
	•	thousand gallons	• • • • • • •		ШШ	0 (16-24)
		hundred tons				(25-32)
		thousand cubic y	ards		ШШ] [] (33-41)
4. Estingener	nate (in whole per cated in 1978 wer	ercents) how these re disposed of:	process w	ast es		₩.dit
•		in landfill			• • • • • • • • • • • • • • • • • • • •	. 42-44)
		in pit/pond/lago	on			. 45-47)
		in deep well				. (48-50)
		incinerated				. [51-53]
		reprocessed/recy	cled			. [54-56]
	•	evaporated				
		unknown				
						. (63-65)
	is the total nu	mber of known sites				-
. prop used	erty where this for the disposa	facility is located l of process wastes	d as one s from thi	site) that Is facilit	have been y since	[] 2 (66-68)
		"B" FOR EACH OF THE			•	
L Have	any of the proc	es wastes generate	ad at this	facility	been	1 1 (60)
	YES, COMPLETE F	m this facility for	- disposai	1: (165-1,	, 110-23	[] (03)
7. Do y	ou know the disp ed from your fac	osal site l∝ations ility since 1950?	s of all o	of the pro o=2)	ocess waste	[] (70)
IF	NO, COMPLETE ON	E FORM "D" FOR EACH AN UNKNOWN LOCATION	H FIRM OR		··· ··································	
· L		year represented l supplied on this a		ntion from	n compan y	196[4] (71:-72)
		year represented by this and other f				
70.04	<u>0-</u> 0-1/2-10-0					

COMPLETE THIS FORM FOR EVERY SITE (INCLUDING THE LOCATION OF THIS FACILITY AS ONE SITE) USED FOR THE DISPOSAL OF PROCESS WASTES GENERATED BY THIS FACILITY SINCE 1950.

NJS 000 001 410

	Un	ited State	es Printing	Ink. Co.				•
Comp	any Name: DIV	. Kewanee	ing. inc.,	Sub. o	f Gulf Oil	Corporatio	n	
Faci	lity Name: Un			g Ink, Li	ttle Ferry	<u>N</u> .J.		
-	of Site: Av	vonLand Fi	11					
Adar	ess of Site:		atmost .				•	
		no.	street		•			
		Lyndhurst	N	IJ				
		city		state	zip code	e		
	of Owner (wh	aile used by	facility):					
		no.	street				·	
		city		state	zip code	e		
	ent Owner (if	different :	from above):					
		no.	street					
		·						
		city		state	zip cod	е		
 4. 5. 6. 	Current statu IF	rship) 3=publes (1= closed CLOSED, specied for process of process of process of closed (s) of disposes (1=current section)	lic ownership d; 2= still : cify year clo ess waste from waste from the thousan hundred thousan sal method(s	p)	on't know) . ility lity (enter ' y disposed a	19 "79" if 19 t site:	614	(12) (13-14)
8.	Users of this		landfi	11, mixed in a function on the state of the	ndustrial wawaste al refuse cos on utralizing) cling ility and ot	te		(43) (44) (45) (46) (47) (48) (49) (50) (51)
	THULLICE OF	,, J uiis	company and	June13, 3 u	C MIUM) .		L	(~~)

LIST NAMES AND ADDRESSES OF OTHER KNOWN USERS BELOW

Company Name: Div. of Kewanee Sub. or Guir or Corporation Facility Name: United tates Printing Ink, Litt. Ferry, NJ Avon Land Fill Site Name: Components (or characteristics) of process waste from this facility disposed at site: (1=present in waste; 2=not present in waste; 9=don't know) FILL IN EVERY BLOCK SPACE Heavy metals & trace metals (bonded organically & inorganically) [1] (20) elastomers
solvents polar (except water)

[2] (46) alcohols 2 (55) Inorganics (58) pharmaceutical wastes 2 (62) FORM C: HAULER INFORMATION

DO NOT USE)

PROVIDE A COMPLETE LIST OF ALL FIRMS AND INDEPENDENT CONTRACTORS, INCLUDING THE COMPANY AND ITS AFFILIATES AND SUBSIDIARIES, USED TO REMOVE PROCESS WASTES FROM THIS FACILITY SINCE 1950.

U. S. Printing Ink Co.

Company Name: Div. of Kewance Ind. Inc., Sub: of Gulf Oil Corporation

Facility Name: United States Printing Ink, Little Ferry, NJ

Name of Firm or Contractor	Address	(If Known)	Years Used
S. & L. Zeppetelli	Moonachie, NJ		1962-1964
Coney Delia (deceased)	Little Ferry, NJ		1950-1962

COMP	LETE THIS FORM FOR EACH FIRM OR INDEPENDENT CONTRACTOR (IN-) (DO NOT L	ISE)	(
CLUD	ING YOUR OWN COMPANY ITS AFFILIATES & SUBSIDIARIES HO VED PROCESS WASTE FROM THIS FACILITY SINCE 1950 AND OK IT		
	N UNKNOWN LOCATION		
	United States Printing Tak Co		
Сотр	any Name: Div. Kewanee Ind. Inc., Sub. of Gulf Oil Corporation	1	
rac1	lity Name: United States Printing Ink		
Name	of Hauling Firm/Contractor: Coney Delia (deceased)		
Addr	ess: (no.) (street) (city) Little Ferry (state) NJ (zip code)		
	(city) Little Ferry (state) NJ (zip code)		
	V Cinat need	(10 11	`
1.	Year first used	1 (10-11	7
3.	Total amount of process waste hauled from this facility:	.] (12.13	,
J.	thousand gallons	1 (14-21)
	hundred tons	1 (22-28	(
	thousand cubic yards] (29-36)
4.	Components (or characteristics) of process waste from this facility dispose	ed.	
	at site: (1=present in waste; 2=not present in waste; 9=don't know): FILL IN EVERY BLOCK SPACE		
A	cid solutions, with pH<3l	2 (37)	
	pickling liquor	2] (30)	
	metal plating waste	<u>괴 (40)</u>	
	circuit etchings	21 (41)	
	organic acid manufacture	2 (42)	
F	lase solutions, with pH>18	21 (43)	
_	caustic soda manufacture	21 (44)	
	nylon and similar polymer generation	2) (45)	
_	scrubber residual	21 (40)	
F	Meavy metals & trace metals (bonded organically & inorganically)	1 (47) 21 (48)	
	arsenic, selenium, antimony	21 (49)	
	iron manganese magnesium	11 (30)	
	vinc cadmium copper chromium (trivalent)	TI (27)	
	chromium (hexavalent)	71 (22)	
_	1630	T 1 ()	
I	Radioactive residues, >50 pico curies/liter	21 (55)	
	lathanide series elements and rare earth salts	21 (56)	
	phosphate slag	2) (57)	
	thorium	21 (58)	
	radium	[2] (59)	
	other alpha, beta & gamma emitters	11 (61)	
,	rganics	21 (62)	
	herbicides & intermediates	121 (⁵³)	
	fingicides & intermediates	121 (64)	
·	rodenticides & intermediates	[2] (03)	
	halogenated aliphatics	2 (67)	
•	halogenated aromatics	(2) (68)	
	PCB/PBB's	21 (69)	
	amides, amines, imides	2 (70)	
	nlastizers	121(/↓)	
	resins	L (/4)	
	elastomers	[2] (74)	
	solvents polar (except water)	台 (75)	
	trichloroethylene	2 (76)	
	other solvents nonpolar	141(//)	
,	solvents halogenated alighatic	121(10)	
	solvents halogenated argmatic	121(/3)1	1
	oils and oil sludges	ப் (ஜ்-	_
	esters and ethers		
	alcoholsketones & aldehydes	$\frac{121}{121}$ (13)	
	dioxins	121 (14)	
	Inorganics	[1](15)	
	53115	$\Pi_{1,1}$	
	mercantans	151(1/)	
	Misc		
	pharmaceutical wastes	12 1 (22)	
	paints & pigments	남지님	
	catarysts (eg. vanaurum, pratrium, parraurum)	12 (22)	
	asbestos	[23)	
	oir water reactive wastes (eg. Pa. aluminum chioride)	121(44).	1 .
	wastes with flash point below 100° F	[2] (25)	2

•					(10 1/01 002)
FORM A: GENERAL	, FACILITY II	RMATION .	•		
		ates Printing In			
-		nee Ind. Inc.		of Gulf Oil	Corporation
Facility Name:	United	States Printing	g Ink		
Address: _		rray Hill Parkwa	ay		•
	No.	Street			
_		herford, NJ		7073	
	City	State	Zip C	ode	
•		Form: Sam Le			
Position:		Chief Eng	ineer		
Phone Number:	(201)	933-7100			•
1 Year Facili	ity Opened .				19 6] 4] (10-11)
					[2 8 9 3] (12-15)
		unts of process wa d by this facility			
		thousand gallons		Ц	(16-24)
		hundred tons	• • • • • • • • •	1	(25-32)
		thousand cubic ya	ards	Ц	1 (33-41)
4. Estimate (generated	in whole per in 1978 were	cents) how these pedisposed of:	process wa	is tes	
·		in landfill	<i>.</i>	. .	(42-44)
		in pit/pond/lagoo	on	. .	(45-47)
		in deep well		· · · · · · · · · · · · · · · · · · ·	(48-50)
		incinerated		,	(51-53)
	•	reprocessed/recyc	cled		(54-56)
		evaporated			(57-59)
		unknown	• • • • • • • • •		(60-62)
		other (Specify			(63-65)
5. What is the total number of known sites (including disposal on the property where this facility is located as one site) that have been used for the disposal of process wastes from this facility since 1950?					
COMPLETE	ONE FORM 'T	B" FOR EACH OF THE	SITES		
6. Have any o	of the processmoved) from	ss wastes generated this facility for	d at this disposal:	facility bed? (Yes=1; no	en =2) 💾 (69)
IF YES,	COMPLETE FOR	RM ''C''	· .		
7. Do you kno hauled fro	w the dispos om your faci	sal site locations lity since 1950? (of all of Yes=1; no	f the process	s waste [] (70)
		FORM "D" FOR EACH N UNKNOWN LOCATION		CONTRACTOR	

9.

FORM B: DISPOSAL SITE INFORMATION

COMPLETE THIS FORM FOR ERY SITE (INCLUDING THE LOCAL W OF THIS FACILITY AS ONE SITE) USED FOR THE DISPOSAL OF PROCESS WASTES GENERATED BY THIS FACILITY SINCE 1950.

NJS 000 001 408

(m wi ost)

Company Name:	v. Kewanee I United Sta Avon Land	nd. Inc. tes Print	Sub:_C ing Ink,	of Gulf Oil C East Ruther	orporation ford, NJ
Address of Site:					_
	no.	street		•	
•	Lyndhurst	ŊJ			_
•	city		state	zip code	
Name of Owner (wh Address:	ile used by fa	cility): _			_
	no.	street	" -		
	city		state	zip code	-
Current Owner (if Address:	different fro	om above):_			_
Address.	no.	street			_
	city	•	state	zip code	-
 Ownership at company owner Current statu Year first us Year last use still in use Total amount Specify type is still in us 	time of use (seship) 3=publicus (l= closed; CLOSED, specimed for processed for process	l= company c ownership 2= still i fy year clo s waste from waste from the thousan hundred thousan l method(s)	ownership; o) on use; 9=d esed om this fact this facilit ed gallons tons d cubic ya e used at s	2=private but con't know) cility lity (enter "7 cy disposed at	2 (11)
	s site (1=this	landfilla	II, mixed in the second	ndustrial waste industrial waste l waste cal refuse co-d is con eutralizing) ycling cility and othe don't know)	e

United States Printing (DO NOT OSE) Company Name: Div Kewapee Ind Inc., Jub:of Gulf Facility Name: United States Printing Ink, East Rutherford, NJ Site Name: Avon Land Fill Components (or characteristics) of process waste from this facility disposed at site: (1=present in waste; 2=not present in waste; 9=don't know) FILL IN EVERY BLOCK SPACE circuit etchings

inorganic acid manufacture

organic acid manufacture

Base solutions, with pH>12

(13)

(14)

(2)

(14)

(2)

(15) lead <u>1</u> (26) elastomers 2 (46)solvents polar (except water) 2 (47)
carbontetrachloride 2 (48)
trichloroethylene 2 (49)

| alcohols | [2] (55) | ketones & aldehydes | [2] (56) | dioxins | [2] (57) | Inorganics | [1] (58) | salts | [1] (59)